

PATENT APPLICATION SERIAL NO. 10/518658

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE  
FEE RECORD SHEET

12/29/2004 GFREY1 00000054 051325 10518658

01 FC:1631	300.00 DA
02 FC:1632	500.00 DA
03 FC:1633	200.00 DA
04 FC:1615	100.00 DA

02 FC:1632 500.00 CR

05/17/2005 AJOHHS02 00000009 051325 10518658  
01 FC:1642 400.00 DA

PTO-1556  
(5/87)

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																																																												
1 Date of Request: <u>5/17/05</u>		2 Serial/Patent # <u>10-578,658</u>																																																										
3 Please refund the following fee(s): <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width: 10%;"><input checked="" type="checkbox"/></td><td style="width: 80%;">Filing</td><td style="width: 10%;">4 PAPER NUMBER</td><td style="width: 10%;">5 DATE FILED</td><td style="width: 10%;">6 AMOUNT</td></tr> <tr><td><input type="checkbox"/></td><td>Amendment</td><td></td><td></td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Extension of Time</td><td></td><td></td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Notice of Appeal/Appeal</td><td></td><td></td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Petition</td><td></td><td></td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Issue</td><td></td><td></td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Cert of Correction/Terminal Disc.</td><td></td><td></td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Maintenance</td><td></td><td></td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Assignment</td><td></td><td></td><td>\$</td></tr> <tr><td><input type="checkbox"/></td><td>Other</td><td></td><td></td><td>\$</td></tr> </table>	<input checked="" type="checkbox"/>	Filing	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	<input type="checkbox"/>	Amendment			\$	<input type="checkbox"/>	Extension of Time			\$	<input type="checkbox"/>	Notice of Appeal/Appeal			\$	<input type="checkbox"/>	Petition			\$	<input type="checkbox"/>	Issue			\$	<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$	<input type="checkbox"/>	Maintenance			\$	<input type="checkbox"/>	Assignment			\$	<input type="checkbox"/>	Other			\$	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%; text-align: center;">7 TOTAL AMOUNT OF REFUND</td> <td style="width: 20%;"></td> </tr> <tr> <td></td> <td></td> <td>\$</td> </tr> </table>					7 TOTAL AMOUNT OF REFUND				\$
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11 REFUND REQUESTED BY:																																																												
TYPED/PRINTED NAME: <u>A JOHNSON</u>		TITLE: <u>Paralegal</u>																																																										
SIGNATURE: <u>A Johnson</u>		PHONE: <u>308-9440</u>																																																										
OFFICE: <u>DO-EU</u>																																																												
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